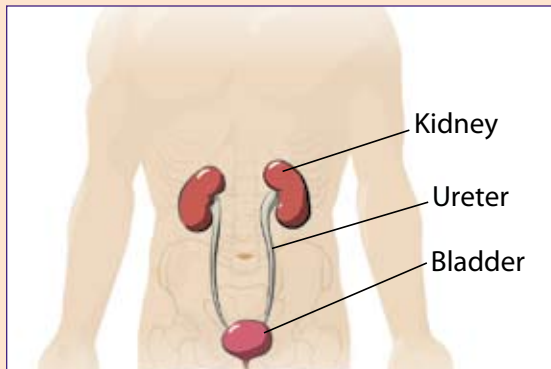


Kidney Cancer

The kidneys are two small, fist-sized organs located behind the abdomen on each side of the spine. Their function is to produce urine, which is then stored in the bladder until it is emptied. By producing urine, kidneys remove toxic by-products and excess fluids from the body. This process helps to maintain a critical balance of salt, potassium and acid.

Each year, 54,000 Americans are diagnosed with kidney cancer and more than 13,000 die from this disease.¹ Overall, kidney cancer is slightly more common in men and is usually diagnosed between the ages of 50 and 70 years. The most common kidney cancer is renal cell carcinoma.

Fortunately, with early diagnosis and treatment, kidney cancer can be cured. If found early, the survival rate ranges from 79 to 100 percent.²



¹"Cancer Facts & Figures 2008," American Cancer Society, www.cancer.org, <http://www.cancer.org/downloads/STT/2008CAFFfinalsecured.pdf>. ²"Kidney Cancer," American Urological Association Foundation, www.urologyhealth.org, <http://www.urologyhealth.org/adult/index.cfm?cat=04&topic=124>.

The Enabling Technology da Vinci Surgical System

The da Vinci Surgical System is designed to provide surgeons with enhanced capabilities, including high-definition 3D vision and a magnified view. Your doctor controls the da Vinci System, which translates his or her hand movements into smaller, more precise movements of tiny instruments inside your body.



Though it is often called a "robot," da Vinci cannot act on its own. Instead, the surgery is performed entirely by your doctor.

Together, da Vinci technology allows your doctor to perform complex procedures through just a few tiny openings. As a result, you may be able to get back to your normal activities faster - without the long recovery that usually follows open surgery.

The da Vinci System has been used successfully worldwide in hundreds of thousands of procedures to date.



Billings Clinic

Facing Kidney Cancer?



Billings Clinic
2800 Tenth Avenue North
Billings, Montana 59101
406-238-2500 or 1-800-332-7156
www.billingsclinic.com/roboticsurgery

0410JG

*Learn why da Vinci[®] Surgery
may be your best treatment option*

Treatments

Kidney cancer is relatively resistant to noninvasive treatments like radiation and chemotherapy.³ As a result, the gold standard treatment for localized kidney cancer is surgery.³

Kidney surgery is traditionally performed using an open approach, which requires a large abdominal incision. Another approach, conventional laparoscopy, is less invasive but limits the doctor's precision, visualization and control compared to open surgery.

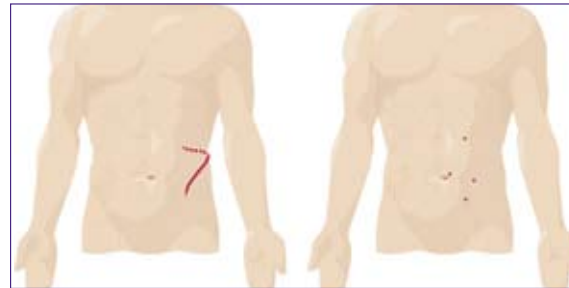
da Vinci Surgery for kidney cancer uses the best techniques of open surgery and applies them to a robotic-assisted, minimally invasive approach.

The precision, vision and control of the da Vinci Surgical System allows your surgeon to provide a precise, minimally invasive treatment for

kidney cancer. It may also provide your surgeon the means to preserve your kidney by removing the tumor and not the entire kidney.

Preserving your kidney can help prevent future kidney disease and even dialysis.

*In certain cases, your doctor may need to remove the entire kidney. If so, he/she will enlarge one incision for removal.



Open Kidney
Surgery Incision

da Vinci
Surgery Incisions

A Less Invasive Approach da Vinci Surgery for Kidney Cancer

If you have been diagnosed with kidney cancer, you may be a candidate for a very effective, minimally invasive approach - da Vinci Surgery.

da Vinci Surgery uses state-of-the-art technology to help your doctor perform a more precise operation as compared to conventional surgery. It offers numerous potential benefits over open surgery, including:

- Significantly less pain⁴
- Less blood loss & fewer transfusions⁵
- Less risk of infection⁶
- Less scarring⁴
- Shorter hospital stay & recovery time⁶
- Increased potential to preserve the kidney in certain cancer operations⁷
- Better clinical outcomes, in many cases⁶

As with any surgery, these benefits cannot be guaranteed, as surgery is patient- and procedure-specific.

³Lane BR, Novick AC. Nephron-sparing surgery. *BJU Int.* 2007 May;99(5 Pt B):1245-50. ⁴Ramaswamy, Sundaram P. Laparoscopic live-donor nephrectomy. University Hospital, Liverpool, UK, and Indiana University Hospital, Indianapolis, USA. January 2006. *British journal of urology*, volume 97, issue 6, June 2006, pages 1154-1160. ⁵Nazemi T., Galich, et al. Radical nephrectomy performed by open, laparoscopy with or without hand-assistance or robotic methods. *Int. braz j urol.* vol.32 no.1 Rio de Janeiro Jan./Feb. 2006. ⁶Renoult, Hubert, et al. Robotassisted laparoscopic and open live-donor nephrectomy. *Nephrology Dialysis Transplantation* 2006 21(2):472-477. ⁷Bhayani, S.B., Das N. Robotic-assisted laparoscopic partial nephrectomy for suspected renal cell carcinoma. *BMC Surgery* 2008, 8:16 doi:10.1186/1471-2482-8-16